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PTO/SB/89 (01-06)
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REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
CORRESPONDENCE ADDRESS

Application Number	10/18/26/14
Filing Date	10/29/2003
First Named Inventor	10/29/2003 Polf FURSTER
Art Unit	
Examiner Name	
Attorney Docket Number	13648

To: Commissioner fo P.O. Box 1450 Alexandría, VA 2						
Please withdraw me	Please withdraw me as attorney or agent for the above identified patent application, and					
all the attorney	all the attorneys/agents of record.					
the attornays/agents (with registration numbers) listed on the attached paper(s), or						
the attorneys/agents associated with Customer Number						
NOTE: This b	ox can only be checked when ners associated with a custom	the power of attorney	of record in the appli	cation is to all the		
The measons for this request are: As of 20 July 2006, I will no longer be associated with the firm Orum & Roth LLC. Partner Keith H. Orum, Registration No. 33985, maintains responsibility for the case.						
CORRESPONDENCE ADDRESS						
2. Change the con	ence address is NOT affected respondence address and directed with Customer Number:	ect all future correspond	dence to:			
Firm or Individual Name	Orum & Roth LLC					
Address	53 W Jackson Blvd Ste 1816					
City	Chicago	Ştate IL		Zip 60604		
Country	US	1				
Telephone	312 922 6262		Email email	@огитгоф,сот		
Signature / DOM	erine of Si	emica				
Name Catherine L. C			Registration No.	50473		
Date 15 July 2008			Telephone No.	312 922 6262		
NOTE, Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approved of withdrawal and the expiration						

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PTO/SB/92 (09-04)
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